UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** VIFORM LIMITED OFFERING EXEMPTION

1400	>8 d							
OMB APPROVAL								
OMB Number:	3235-0076							
Expires: April 30, 20	008							
Estimated average	Estimated average burden							

SEC USE ONLY							
Prefix		Serial					
DATE RECEIVED							

hours per response 16.00

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)	
NAV Management, LLC (limited liability interests offering) (1st Close)	
Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 ☒ Rule 506 □ Section 4(6) □ ULOE	
Type of Filing : New Filing : Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer.	07087489
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	0,00,100
NAV Management, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) 703-563-4105	5
11600 Sunrise Valley Drive, #420, Reston, VA 20191	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone No.	umber (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business: Venture Capital	
Type of Business Organization	
	limited liability company
☐ business trust ☐ limited partnership, to be formed	
	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DI	€
CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Scotor 46 2008. FR 230.501 et seq. or 15 U.S.C. 77d(6).

THOMSON When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice must be filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and managing partner of partnership issuers.

• Lacir general and managing p	Dartier of partitership issuers.			
Check Box(es) that Apply: Pro	omoter Beneficial Owner	☐ Executive Officer	☐ Director	■ General and/or Managing Partner
Full Name (Last name first, if individed Backus, John	luai)			
Business or Residence Address 11600 Sunrise Valley Drive, #420, R	(Number and Street, City, Stateston, VA 20191	e, Zip Code)		
Check Box(es) that Apply:	moter 🗷 Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if individual Delistathis, Thanasis	dual)			
Business or Residence Address (No. 11600 Sunrise Valley Drive, #420, R		ip Code)		
Check Box(es) that Apply:	omoter 🗷 Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if individual Hixon, Todd	iual)			555 <u>.</u>
Business or Residence Address (No One Broadway, 14th Floor, Cambrid		ip Code)		
Check Box(es) that Apply:	omoter 🗷 Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if individ Johnson, Scott	iual)			
Business or Residence Address (No One Broadway, 14th Floor, Cambrid		ip Code)		
Check Box(es) that Apply: ☐ Pro	omoter Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individ	iual)			
Business or Residence Address (No	umber and Street, City, State, Z	ip Code)		
(Use	blank sheet, or copy and use ac	ditional copies of this she	et, as necessary.)	, <u>, , , , , , , , , , , , , , , , , , </u>

				B. INFO	RMATIO	N ABOUT	OFFER	ING				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes □	No ⊠		
Answer also in Appendix, Column 2, if filing under ULOE.												
What is the minimu	m investme	ent that wil	ll be accept	ted from ar	ny individu	al?		**************	******		\$0.0	0
Does the offering pe	ermit joint	ownership	of a single	unit?	• • • • • • • • • • • • • • • • • • • •				***************************************		Yes	No
Enter the informat commission or simi person to be listed i list the name of the dealer, you may set	ion reques lar remune s an associ broker or forth the ir	ted for ea ration for ated person dealer. If aformation	solicitation or agent of more than for that br	who has of purcha of a broker of five (5) p oker or dea	been or value of the sers in control or dealer in the sersons to large only.	will be pa nection wi registered voe listed ar	id or given th sales of vith the SE e associate	n, directly securities in C and/or w d persons o	or indirect the offeri th a state of of such a b	tly, any ng. If a or states, roker or		
Full Name (Last na	me first, if	individual))									
Business or Resider	nce Address	s (Number	and Street	, City, Stat	e, Zip Cod	e)					-	
Name of Associated	l Broker or	Dealer										
State in Which Pers												
(Check "A	All States" o	or check in	dividual St	ates)	••••••			*****************	*************			All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Last na	me first, if	individual))									
Business or Resider	nce Addres	s (Number	and Street	, City, Stat	e, Zip Cod	e)						
Name of Associated	Broker or	Dealer										
State in Which Pers (Check "A												All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Last na	me first, if	individual)									
Business or Resider	nce Addres	s (Number	and Street	, City, Stat	e, Zip Cod	e)						.
Name of Associated	i Broker or	Dealer			•							
State in Which Pers												All States
[AL] [IL] [MT]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

already sold. Enter '	ggregate offering price of securities included in this offering and the total amount "0" if answer is "none" or "zero." If the transaction is an exchange offering, check icate in the columns below the amounts of the securities offered for exchange and		
T	ype of Security	Aggregate Offering Price	Amount Already Sold
	ebt	\$0	\$0
E	quity	\$0	\$0
	☐ Common ☐ Preferred		
C	onvertible Securities (including warrants)	\$0	\$0
P	artnership Interests	\$0	\$0
o	ther (Specify) limited liability membership interests	\$40.00	\$40.00
Т	otal	\$40.00	\$40.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
his offering and the indicate the number	umber of accredited and non-accredited investors who have purchased securities in he aggregate dollar amounts of their purchases. For offerings under Rule 504, of persons who have purchased securities and the aggregate dollar amount of their al lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	·	4	\$40.00
Non-accredited Inve	stors	N/A	N/A
Total (for filings und	der Rule 504 only)	N/A	N/A
Α	nswer also in Appendix, Column 4, if filing under ULOE.		
securities sold by the	g is for an offering under Rule 504 or 505, enter the information requested for all e issuer, to date, in offerings of the types indicated, in the twelve (12) months prior curities in this offering. Classify securities by type listed in Part C – Question 1.		
N	ot Applicable.		
Type of of	fering	Type of Security	Dollar Amount Sold
R	ule 505	N/A	N/A
R	egulation A	N/A	N/A
R	ule 504	N/A	N/A
Т	otal	N/A	N/A
of the securities in issuer. The inform	urnish a statement of all expenses in connection with the issuance and distribution this offering. Exclude amounts relating solely to organization expenses of the nation may be given as subject to future contingencies. If the amount of an nown, furnish an estimate and check the box to the left of the estimate.		
Т	ransfer Agent's Fees		\$0
	rinting and Engraving Costs		\$0
	egal Fees		\$0

, L	\$0
	□ \$0
	□ \$0
	□ \$0
. [□ \$0
С	\$40.00
•	
Payments to Officers, Directors & Affiliates	' Payments To Others
\$0 🗆	\$0
3 \$0 □	\$0
\$0 □	\$0
\$0 □	\$0
	1 00
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	• • • • • • • • • • • • • • • • • • • •
	1 \$0
3 \$0 ₺	\$40.00
	\$40.00
.	
nission, upon written rec	e 505, the following quest of its staff, the
Date	
December	<u>]</u> , ₂₀₀₇
tions. (See 18 U.S.C	C. 1001).
	Payments to Officers, Directors & Affiliates SO

E. STATE SIGNATURE

1.	Is any party described in 17 CFR 230.262 pre-	esently subject to any of the disqualification	Yes	No E
		nn 5, for state response.	Ь	ica
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required by	furnish to any state administrator of any state in way state law.	hich this notice i	is filed, a notice on Form D
3.	The undersigned issuer hereby undertakes to offerees.	furnish to the state administrators, upon written re	quest, informatio	on furnished by the issuer to
4.		suer is familiar with the conditions that must be say which this notice is filed and understands that these conditions have been satisfied.		
	e issuer has read this notification and knows the dersigned duly authorized person.	e contents to be true and has duly caused this notice	to be signed on	its behalf by the
Issı	uer (Print or Type)	Signature Co.	Date	2/
NΑ	V Management, LLC	Duey 514	Decemi	bec
	ne (Print or Type)	Title (Print or Type)		
Tha	ınasis Delistathis	Managing Member		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend non-ac investor	to sell to coredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification Under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	\$40.00 Limited Liability Interests	Number of Accredited Investors	Amount	Number of Non- Accredite d Investors	Amount	Yes	No	
AL		х	Same as above	0		0			X	
AK		х	Same as above	0		0			X	
AZ		Х	Same as above	0		0			X	
AR	•	х	Same as above	0		0			Х	
CA		х	Same as above	0		0			X	
СО		X	Same as above	0		0			X	
СТ		х	Same as above	0		0			X	
DE		x	Same as above	0		0			х	
DC		х	Same as above	0		0			x	
FL		x	Same as above	0		0			Х	
GA		х	Same as above	0		0			x	
ні		х	Same as above	0		0			х	
ID		x	Same as above	0		0			х	
, IL		х	Same as above	0		0			х	
IN		х	Same as above	0		0		-	х	
IA		х	Same as above	0		0			х	
KS		х	Same as above	0	• • • • • • • • • • • • • • • • • • • •	0			x	
KY		х	Same as above	0	······································	0		•	х	
LA		х	Same as above	0		0			х	
ME		х	Same as above	0		0			х	
MD		Х	Same as above	1	\$10.00	0			х	
MA		Х	Same as above	2	\$20.00	0			x	
MI		Х	Same as above	0		0			х	
MN		Х	Same as above	0		0			х	
MS		Х	Same as above	0		0			х	

APPENDIX

1		2	3		4			5 Disquali	
	non-ac	to sell to ceredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of inve amount purcha (Part C-It		Under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	\$40.00 Limited Liability Interests	Number of Accredited Investors	Amount	Number of Non- Accredite d Investors	Amount	Yes	No
МО		X	Same as above	0		0			X
MT		х	Same as above	0		0			X
NE		х	Same as above	0		0			x
NV		х	Same as above	0		0			X
NH		х	Same as above	0		0			X
NJ		Х	Same as above	0		0			X
NM		Х	Same as above	0	• "	0			x
NY		X	Same as above	0		0			X
NC		х	Same as above	0		0			X
ND		х	Same as above	0		0			x
ОН		х	Same as above	0		0			Х
OK		х	Same as above	0		0			х
OR		x	Same as above	0		0			X
PA		х	Same as above	0		0			X
RI		х	Same as above	0		0			X
SC		Х	Same as above	0		0			X
SD		X	Same as above	0		0			x
TN		х	Same as above	0		0			х
TX		х	Same as above	0		0		-	Х
UT		х	Same as above	0		0			Х
VT		X	Same as above	0		0			X
VA		х	Same as above	1	\$10.00	0			х
WA		Х	Same as above	0	-	0			x
WV		Х	Same as above	0		0			х
WI		X	Same as above	0		0			х
WY		X	Same as above	0		0			х

APPENDIX

1	non-ac	to sell to ceredited rs in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of inve amount purchas (Part C-It		Disquali Under State yes, attach e waiver g (Part E-	ULOE (if explanation f granted)	
State	Yes	No	\$40.00 Limited Liability Interests	Number of Accredited Investors	Amount	Number of Non- Accredite d Investors	Amount	Yes	No
PR		х	Same as above	0		0			х
FN		Х	Same as above	0		0			х

